



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re-Patent Application of
St. George-Hyslop et al.

Application No. 08/509,359

Filed: July 31, 1995

For: GENETIC SEQUENCES AND PROTEINS
RELATED TO ALZHEIMER'S DISEASE

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:
: Group Art Unit: 1654
:
: Examiner: P. Duffy
:
: Date: November 11, 1998

#27

BOX AF

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in response to a final rejection in the above-identified application.

- ☒ This submission is being filed under 37 C.F.R. §1.116.
- ☐ This is a first submission under 37 C.F.R. §1.129 and does not introduce new matter into the disclosure. Please enter the amendment and withdraw the finality.
- ☐ This is a second submission under 37 C.F.R. §1.129 and does not introduce new matter into the disclosure. A first submission and fee were submitted on . Please enter the amendment and withdraw the finality.

The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2)	(3)	(4)	(5)	(6)	(7)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PAID FOR	NUMBER OF EXTRA CLAIMS	RATE	ADDL. FEE
TOTAL CLAIMS	* 13	MINUS	20	= 0	x \$ 11 = \$	0.00
INDEP. CLAIMS	* 3	MINUS ***	4	= 0	x \$ 41 = \$	0.00
FEE FOR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM(S)					\$135 = \$	0.00
FEE FOR ENTRY OF SUBMISSION AFTER FINAL REJECTION UNDER 37 C.F.R. § 1.129(a)					\$395 = \$	0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT.....						\$ 0.00

- * If the entry in col. 2 is less than entry in col. 4 write "0" in col. 5.
- ** If the "highest number paid for" in this space is less than 20, write "20" in this space.
- *** If the "highest number paid for" in this space is less than 3, write "3" in this space.

1. ☒ No additional fee is required.
2. ☐ Charge _____ to Deposit Account No. 12-1095. A duplicate copy of this sheet is enclosed.
3. ☒ Please charge any additional fees or credit overpayment to Deposit Account No. 12-1095. A duplicate copy of this sheet is enclosed.

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